July 13, 2006

Kansas Health Policy Authority Marcia Nielsen, Executive Director, Connie Hubbell, Chair

Dear Members of the Kansas Health Policy Authority:

Thank you all for convening this meeting, for making community engagement a priority, and for listening to our hopes for the Kansas Health Policy Authority. I have read the biosketches of the Board members and ex-officio board members, and I am appropriately humbled to speak before you today.

Primarily, I am addressing you as an active member of the Kansas Public Health Association. Our association has over 500 members representing local, state, non-profit and academic public health. In addition to my affiliation with the Kansas Public Health Association, I work full time for the Sedgwick County Health Department.

I am also a citizen of Kansas where my health system also affects my extended family, my husband and five children. I am personally and professionally vested in the success of your work in health policy in Kansas.

It is a daunting challenge to intentionally guide our health system beyond the traditional system of market forces and disease care. It is exciting to see that your mission includes promoting public health strategies. As you take on this challenge, please consider new, bold and creative strategies to address the five priorities.

First, Preparing for and Controlling Infectious Disease--. Controlling communicable diseases through education, surveillance and immunizations has been a traditional role of public health for the last century. Recent outbreaks in Kansas of vaccine preventable diseases like Pertussis and Mumps remind us that we must remain vigilant in efforts to control known, preventable communicable diseases. Public health needs support to continue doing the quiet work of prevention even as we are called on to prepare for and respond to new concerns like pandemic influenza.

Second, Infrastructure-- We need to be part of the planning for health information technologies and health information exchange projects in our state.

Furthermore, last year the National Association of City and County Health Officials (NACCHO) published the Operational Definition of a Local Health Department based on the ten essential public health services. There are 99 health departments in Kansas, and their staffing ranges from 1.5 FTE to 180FTE. As the national conversation moves toward consideration for accreditation based on our ability to deliver the ten essential public health standards, new and creative partnerships and plans will need policy guidance to lead change and assure that all Kansans are adequately served by public health.

Third, Workforce Development. The American Public Health Association president, Dr. Georges Benjamin reports that in 2007 nearly half of the federal public health employees will be eligible for retirement. There will be a big retirement turnover soon and no assurance that we have persons trained in public health to replace those currently at our front lines. We need to step up our education and training.

Fourth, Access to Medical and Dental Care—Is medical and dental care a right or a privilege for residents of Kansas? It seems everyone knows that the evidence shows that people who are uninsured

- \Rightarrow delay treatment,
- \Rightarrow have worse health outcomes,
- ⇒ create burdens to the heath care system that drive up costs for all and
- ⇒ that medical debt is a leading reason for personal bankruptcy.

Others will speak more passionately than I can on this point, and I can see from the notes of your meetings that you are already investigating the ways that other states have expanded Medicaid to cover more people. Public health looks forward to action on this effort.

However, as a representative of public health I want to stress the importance of prevention. It is clear that your board was named "health policy" and not "health care policy" and this was surely intentional. If our state is to become healthier, we could do this more effectively and efficiently in population health strategies rather than only focusing on personal care. Former Secretary of Health and Human Services Tommy Thompson reported that 95% of our health dollars are spent on disease care and only 5% on prevention. If we hope to make a significant change in health, then we must increase our prevention efforts.

Thus, the fifth and most important priority is Chronic Disease Prevention. So, please let me take this opportunity to share some startling statistics.

- Five chronic diseases—cause more than two-thirds of all deaths each year.
- Chronic disease accounts for roughly 75% of health care costs each year.
- Direct medical expenditures attributed to smoking total more than \$75 billion per year. And \$117 billion for obesity.

We can begin to make changes with proven best practices including increasing the availability of fresh fruits and vegetables through community gardens, wellness programs for schools, churches, and worksites, focusing on developing aggressive food, physical activity and tobacco policies to make us all healthier.

On behalf of our entire KPHA membership, I urge you to lead change in bold and imaginative ways. Any initiatives you take to support society's interest in assuring that Kansans are as healthy as they can be will receive our unqualified and vigorous support.

I'd like to close with a quote from Hippocrates: "The function of protecting and developing health must rank even above that of restoring it when it is impaired."

Sonja Armbruster

Kansas Public Health Association, member

Sedgwick County Health Department, Policy and Program Development Coordinator

Kansas Health Policy Authority Handout for Stakeholder Meetings

Kansas Public Health Association

Elaine Schwartz, Executive Director Kim Richter PhD, Chair - KPHA Legislative Action Committee

July 2006

Speaking for KPHA are:

Kansas City Meeting:

Dr. Ellen Averett and Dr. Michael Fox with KUMC

Wichita Meeting:

Sonja Armbruster with Sedgwick County Health Department

Hays Meeting:

Patricia Dunlap with Rooks County Health Department

What is Public Health?

According to the National Institutes of Medicine, Public Health is improving health through a population focus.

The Health System in Kansas includes public health in many ways: governmental, private practice, in research and academics.

We Have Much to Be Proud of...

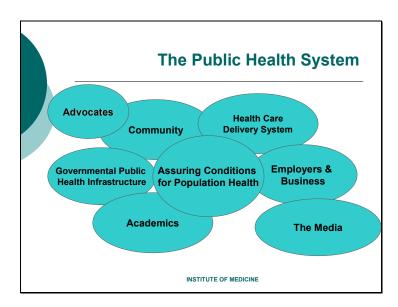
- Many of us are benefiting from medical advances, and are living longer, healthier, and more productive lives.
- We export our medical know-how, advanced technology, and breakthrough medicines throughout the globe.
- Most of us say that we are pleased with the health care we receive.

...But We Also Have Serious Problems

Reliable data show we have significant issues with:

- o Escalating *costs*
- o Unreliable *quality*
- o Inconsistent *access* to health care

Slide 6



Building infrastructure

- ${\rm o}\, {\mbox{\sf People}}$ should be able to be protected from illness or injury when possible
- oThe cost and personal burden of preventable disease and injury are too much for all of us
- o It's just not right that some groups are usually sicker than others
- $\ensuremath{\text{o}}$ There's a gap between what is proven to work and what is available and used

is now a priority

Public Health in Kansas

- 99 Health Departments in 105 counties. County funds (with some state, federal and private). 1.5 180 FTE staff.
- Some have federally supported primary care clinics.
- Some have vigorous partnerships with school
- nurses and local agencies.

- Innovative entrepreneurial ideas and programs exist.
 Local accountability.
 Experienced in working with high-risk low literacy families.
- Environmental health.
- Goals: Surveillance, Assurance, Policy Development. KPHA comprises staff from health departments, academic universities, and collaborative agencies

Things to Remember...

- You have many friends in public health.
- Use pilot projects to let the best entrepreneurial ideas lead the rest.
- Engage many at the same time.
- $\circ\,$ Plan for and listen to evaluators.
- Demand accountability.
- Health departments are already stretched! Resources needed.
- Leverage federal funds using local expenditure and projects.

Thank you

- KPHA represents over 500 members and over 100 organizations across the state, and is the oldest and largest public health organization in Kansas
- o Contact the KPHA office: email:

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